

FMS - Fibromyalgia Syndrome

FMS-CUL CULTURAL/SPIRITUAL ASPECTS OF HEALTH

OUTCOME: The patient/family will understand the impact and influences that cultural and spiritual traditions, practices, and beliefs have on health and wellness.

STANDARDS:

1. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness. Refer to clergy services, traditional healers, or other culturally appropriate resources.
2. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are positive or detrimental interactions with prescribed treatment. Explain that the medical treatment plan must be followed as prescribed to be effective.

FMS-DP DISEASE PROCESS

OUTCOME: The patient/family will understand the symptoms and prognosis of fibromyalgia.

STANDARDS:

1. Discuss that the exact cause of fibromyalgia syndrome (FMS) is unknown. Discuss that fibromyalgia is a complex, chronic condition characterized by achy pain, stiffness, sleep problems, and fatigue.
2. Explain that there is currently no specific test for FMS and that the diagnosis is made by symptom history and physical exam.
3. Discuss the patient's specific conditions, including anatomy and physiology as appropriate. Discuss any associated conditions.
4. Explain that FMS symptoms vary in location and severity from day-to-day and does not cause deformities nor is it life threatening. Symptoms include:
 - a. Reduced physical endurance
 - b. Insomnia or poor sleep
 - c. Depression, generalized fatigue, or tiredness
 - d. Sensation of numbness in hands and feet
 - e. Generalized aches, pains, and muscle spasms
 - f. Morning stiffness
5. Review-predisposing factors for FMS, e.g., female, age 20-60 years old, physical or mental stress and physical trauma (e.g., accident, injury, or severe illness). Discuss factors that may worsen or aggravate the symptoms (e.g., obesity,

sedentary lifestyle, medical illness, surgery, stress or anxiety, and ineffective coping skills).

FMS-EX EXERCISE

OUTCOME: The patient/family will understand the role of increased physical activity in enhancing physical and psychological well-being.

STANDARDS:

1. Explain that low impact aerobic activity, stretching or gentle physical activity programs will reduce the symptoms of fibromyalgia.
2. Encourage the patient to start slow and build up physical activity tolerance in small increments. If physical activity causes increased pain the healthcare provider should be contacted.
3. Assist the patient in developing a personal physical activity plan; some examples are walking, tread mill, stretching, swimming in warm water, or pace programs from the arthritis foundations.
4. Explain that the optimum goal is at least 150 minutes of physical activity a week, for example, walking:
 - a. 30 minutes 5 days per week
 - b. 15 minute bouts 2 times a day 5 days per week
 - c. 10 minute bouts 3 times a day 5 days per week
5. Discuss obstacles to a personal exercise plan and solutions to those obstacles.
6. Discuss medical clearance issues for physical activity.

FMS-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up and will make a plan to make and keep follow-up appointments.

STANDARDS:

1. Provide positive reinforcement for areas of achievement.
2. Emphasize the importance of follow-up care to prevent complications and adjustments of medications.
3. Encourage active participation in the treatment plan.
4. Explain the procedure for obtaining appointments.

FMS-L LITERATURE

OUTCOME: The patient/family will receive literature about FMS.

STANDARDS:

1. Provide the patient/family with literature on FMS.
2. Discuss the content of the literature.
3. Point out to the patient/family the numerous professional organizations that are knowledgeable about FMS pain management.

FMS-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient/family will understand what lifestyle adaptations are necessary to cope with FMS.

STANDARDS:

1. Explain that the patient has a responsibility to make lifestyle adaptations to relieve or control symptoms. It is a process of making wise choices and changes that will positively affect the overall state of health.
2. Emphasize the importance of rest, avoidance of fatigue, and learning to cope with mental and physical stress .
3. Discuss the use of heat and cold as appropriate.
4. Refer to Social Services, Behavioral Health, Physical Therapy, Registered Dietitian, Rehabilitative Services, and/or community resources, as appropriate.
5. Review the areas that may require adaptations: diet, physical activity, sexual activity, and bladder/bowel habits.
6. Discuss ways to improve communication with family, friends, and caregivers to understand the patient's needs related to employment and family stress. Newly diagnosed patients need to know that it is not their fault they have FMS. FMS is a recognized medical condition.

FMS-M MEDICATIONS

OUTCOME: The patient/family will understand the prescribed medication(s) for FMS.

STANDARDS:

1. Review the patient's medication. Reinforce the importance of knowing the medication, dose, and dosing interval of medications. Common medications used in the treatment of FMS are analgesics, anti-inflammatory and anti-depressants, muscle relaxants, pain patches, or trigger point injections. Narcotics (opioids) are controversial and may require chronic pain management.
2. Discuss potentially adverse interactions with other drugs (e.g., OTC medications, traditional/herbal medications) and the adverse effects of these medications when combined with certain foods.
3. Emphasize the importance of checking with a medical provider prior to starting any prescription, OTC, or herbal/traditional treatments.

4. Discuss the importance of taking medications as prescribed. It is important not to increase the dose of medications without first consulting the healthcare provider. It's important to let the provider know if a treatment is not working (e.g., what works for one may not work for another in treating FMS).

FMS-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient and family will understand the specific nutritional intervention(s) needed for treatment or management of this condition, illness, or injury.

STANDARDS:

1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
2. Review the basic nutrition recommendations for the treatment plan.
3. Discuss the benefits of nutrition and exercise to health and well-being.
4. Assist the patient/family in developing an appropriate nutrition care plan.
5. Refer to other providers or community resources as needed.

FMS-N NUTRITION

OUTCOME: The patient/family will understand the role of nutrition in fibromyalgia.

STANDARDS:

1. Discuss that foods such as berries, fruits, vegetables, nuts, germinated seeds, and sprouts are rich sources of anti-oxidants and may decrease joint stiffness.
2. Explain that herbs and botanical supplements should not be used without discussing with a physician/pharmacist.
3. Explain that a weight-loss plan may be beneficial if overweight.
4. Refer to a Registered Dietitian (RD).

FMS-PM PAIN MANAGEMENT

OUTCOME: The patient/family will understand pain management techniques.

STANDARDS:

1. Discuss non-pharmacologic pain control measures such as:
 - a. Massage therapy, biofeedback, relaxation training
 - b. Chiropractic, yea, and Tai Chi
 - c. Traditional healing
 - d. Myofascial release
 - e. Trigger point therapy
 - f. Gentle stretching and low impact activity
 - g. Occupational therapy
2. Discuss cognitive/behavioral therapy. Attitude is a strong predictor of how well a patient will manage FMS. Hopelessness, negative thinking, and victim mentality are barriers to treatment.

FMS-SM STRESS MANAGEMENT

OUTCOME: The patient will understand the role of stress management in chronic pain management.

STANDARDS:

1. Explain that uncontrolled stress may exacerbate the symptoms and interferes with the treatment of chronic pain of FMS. This can set up a cycle of pain-stress which becomes self-sustaining and may escalate.
2. Discuss that in chronic pain, uncontrolled stress may lead to depression or other mood disorders. **Refer to CPM-PSY.**
3. Explain that effective stress management may reduce the severity of symptoms the patient experiences, as well as, help improve the health and well-being of the patient.
4. Discuss that stress may exacerbate adverse health behaviors such as increased tobacco, alcohol, or other substance use as well as overeating, all which can increase the severity of pain.
5. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
 - a. Becoming aware of your own reactions to stress
 - b. Recognizing and accepting your limits, while setting realistic goals
 - c. Talking with people you trust about your worries or problems
 - d. Getting enough sleep
 - e. Maintaining a healthy diet
 - f. Exercising regularly

- g. Taking vacations
 - h. Practicing meditation, self-hypnosis, and positive imagery
 - i. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
 - j. Participating in spiritual or cultural activities
6. Provide referrals as appropriate.

FMS-TE TESTS

OUTCOME: The patient/family will understand the test(s) to be performed, including indications and impact on further care.

STANDARDS:

1. Explain the test ordered. Laboratory and x-ray tests for FMS are usually normal. FMS can mimic several other diseases so other conditions need to be ruled out before a diagnosis of FMS can be made, e.g., thyroid disease, arthritis, multiple sclerosis, or lupus. It is possible to have a co-existing diagnosis.
2. Explain the necessity, the benefits, and the risks of the test to be performed, as appropriate, including possible complications that may result from not having the test performed.
3. Explain how the test relates to the course of treatment.
4. Explain any necessary preparation for the test, including appropriate collection.
5. Explain the meaning of the test results, as appropriate.